PAKISTAN

Consolidated Emergency Report 2022



Seven-year-old Shukri, smiles making a victory sign as she continues to receive education at one of the Temporary Learning Centres set up by UNICEF for children of flood affected communities in Mirpur Khas district, Sindh Province of Pakistan.

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Expression of Thanks

UNICEF's work is funded entirely through the voluntary support of millions of people around the world and our partners in government, civil society and the private sector. Voluntary contributions enable UNICEF to deliver on its mandate to protect children's rights, to help meet their basic needs, and to expand their opportunities to reach their full potential. We take this opportunity to thank all our partners for their commitment and trust in UNICEF.

Contents

Executive Summary	4
Humanitarian Context	7
Humanitarian Results	8
Humanitarian Coordination	
Maternal, Newborn and Child Health	8
Nutrition	9
Water, Sanitation and Hygiene	10
Education	
Child Protection	14
SBC and Community Engagement	15
Advocacy and external communication	
Preparedness, Resilience and Disaster Risk Reduction	
Prevention of Sexual Exploitation and Abuse	
Assessment, Monitoring and Evaluation	18
Financial Analysis	18
Future Workplan	21
Donor Feedback Form	22
Human Interest Stories (attached separately)	

Acronyms

AWD Acute Watery Diarrhoea

C4D Communication for Development

CSO Civil Society Organization
DRM Disaster Risk Management

DRR Disaster Risk Reduction

EiE Education in Emergencies

GB Gilgit Baltistan

HAC Humanitarian Action for Children

HACT Harmonized Approach to Cash Transfer

IPC Infection Prevention and Control
IYCF Infant and Young Child Feeding

KAP Knowledge, Attitudes and Practices

KP Khyber Pakhtunkhwa LHW Lady Health Worker

MHPSS Mental Health and Psychosocial Support

MoNHSR&C Ministry of National Health Services, Regulation and Coordination

NDMA National Disaster Management Authority
PDMA Provincial Disaster Management Authority

PPE Personal Protective Equipment

PSEA Prevention of Sexual Exploitation and Abuse

RCCE Risk Communication and Community Engagement

RUTF Ready-to-Use Therapeutic Food

SAM Severe Acute Malnutrition

UNFPA United Nations Population Fund
UNHCR United Nations Refugee Agency
UNICEF United Nations Children's Fund

UNOCHA United Nations Office for the Coordination of Humanitarian Affairs

WASH Water, Sanitation and Hygiene

WHO World Health Organization

Executive Summary

In January 2022, Pakistan witnessed the fifth wave of COVID-19 which lasted till March 2022. Since June there was a surge in COVID-19 cases again hence Pakistan entered a sixth wave of COVID-19. By the end of the year there were 1,575,805 confirmed COVID-19 cases, 1,544,422 recoveries, 30,636 deaths and 747 active cases.

During the monsoon season, Pakistan experienced its "worst disaster in decades" (UNDP 2023) through extreme floods, leaving a third of the country submerged, about 15,000 dead (including more than 400 children) or injured, and 8 million people displaced. Moreover, global fuel and commodity prices have severely impacted Pakistan's economy. Pakistan's Gross Domestic Product (GDP) grew by 6.03 per cent in 2021—forecasted by the World Bank to slow to 2 per cent in 2023, amid catastrophic floods, IMF restrictions, policy tightening, and high public debt. Due to the remnants of the COVID-19 pandemic and the devastating floods affecting Pakistan in 2022, economic and political instability and high inflation may push between 5.8 and 9 million people into poverty. Consequently, the Benazir Income Support Programme (BISP) distributed PKR 70 billion among 2.8 million flood-affected families, providing Rs25,000 per family. However, with disrupted livelihoods and incomes, more households forego health, nutrition, and education services, leading to poor child development and unhealthier pregnancies, making it impossible to achieve Sustainable Development Goals (SDGs) by 2030.

These two were the main emergencies that were faced during the year apart from which UNICEF also supported response for Nutrition emergency and AWD, Cholera emergency to state the key scenarios.

Health

UNICEF continued responding to health emergency of COVID-19 Pandemic with continuation of essential health services, capacity building of health care workers and provision of basic Personal protective equipment (PPE) and essential medical supplies. UNICEF continued its support in the uptake of COVID-19 vaccinations with 84% of population fully vaccinated and 88 per cent partially vaccinated, The booster vaccinations are also being administered at designated government vaccination centres. UNICEF also responded to the AWD outbreak and Malaria and Dengue outbreaks through provision of necessary trainings to medical staff, provision of medical supplies and testing kits and establishing specialized areas in public health facilities to respond to health emergencies. With the onset of floods, UNICEF mobilized supplies by getting necessary medicines (including medicines to treat diarrhoea, malaria, acute respiratory infection etc) through four charter planes and quickly sending them to the flood affected areas. During floods, UNICEF supported the public health facilities by provision of human resources, medical equipment, emergency kits and supporting mobile health teams to reach to the affected communities.

Nutrition

In 2022, Nutrition services focused on COVID-19 and the influx of Afghan refugees in Afghan bordering districts during the first half of the year, while devastating floods in the country shifted Nutrition response towards the flood emergency for affected populations in the second half of 2022. With existing high prevalence of wasting in country than global wasting threshold, 2022 flash floods affected more than 1.5 million severely acute malnourished children under 5 years of age. In response, UNICEF built capacity of nutrition focal persons on simplified protocols, ensured coordination with MoNHSR&C for BMS enactment and provided services for the treatment of children with Severe Acute Malnutrition (SAM), promotion of key nutrition practices and provision of multi micronutrient supplementation for children, adolescent girls and Pregnant Lactating Women (PLW).

In 2022 humanitarian response treated a total of 215,341 children (104,998 girls and 110,343 boys) of 6-59 months of age for the management of SAM with Ready-to-Use-Therapeutic-Food (RUTF), 1.3 million mothers and caregivers counselled on the promotion of breastfeeding and age-appropriate complementary feeding, and 391,496 (208,109 girls and 183,387 boys) children provided Micro-Nutrient Powder (MNP) sachets to prevent micronutrient deficiencies.

Education

During 2022, education interventions focused on emergency response and continuity of learning for two major emergencies: COVID-19 and monsoon rains and floods.

To mitigate the impact of COVID-19 on learning, UNICEF along with its partners supported safe school operations and functioning in 819 formal and non-formal schools, benefiting 27,455 children (17,481 girls) during the first half of 2022.

A total of 822 teachers and education officials (484 women) were trained on safe schools reopening. In addition, 851 teachers and education officials (415 women) were trained on Mental Health and Psychosocial Support (MHPSS). To support learning activities of students, 75,397 people (including 32,056 girls and women) were reached with messages on enrolment/ attendance of children through SMS and different social media platforms. In Sindh, messages related to COVID-19 vaccination and compliance of COVID-19 SOPs were sent to 10,231 education managers through WhatsApp groups. To address the low vaccination rates of education staff and students in Balochistan, UNICEF conducted focused sessions on vaccine awareness in the professional development programme for teachers, to identify issues restricting vaccination rates in schools. The challenges identified through these FGDs were shared with stakeholders to help enhance vaccination coverage.

As a response to the major rains and floods emergency, UNICEF supported the establishment of safe inclusive, and accessible learning opportunities, reaching 124,461 children (52,457 girls). A total of 996 TLCs (Temporary Learning Centres) were established, across Balochistan, Punjab and Sindh provinces, equipped with teaching and learning and recreational materials, and reaching 86,009 children (37,181 girls). In addition, 38,452 children (15,276 girls) benefited from dewatering, cleaning and fumigation of schools.

The Education Sector Working Group (ESWG), co-led by UNICEF, continued to provide support to ensure continuity of learning and adherence to approved standard operating procedures (SOPs) for safe re-opening of schools. Under its capacity building plan, ESWG conducted three days training on Education in Emergencies for members in June 2022, attended by 40 members, including 12 women.

Child protection

Child protection focused on COVID-19 and Afghan refugee response in the first half of 2022, and in the second half of the year expanded emergency responses to address the floods that devastated much of the country. Pre-existing child protection vulnerabilities in affected communities were further exacerbated by displacement and disruption of livelihoods, education and other essential services. In response, UNICEF partnered with government and civil society organisations to ensure sub-sector coordination and the delivery of a package of child protection interventions in flood affected areas that included awareness raising and community engagement on key child protection risks, community-based mental health and psychosocial support to children and their caregivers and responses for children at risk and survivors of child protection violations via a case management approach.

In 2022, UNICEF reached 1,528,407 with information on child protection risks and available services, 266,048 girls, boys and caregivers accessed mental health and psychosocial support to help them cope with the impact of the flood and 1077 children at risk and

survivors of child protection violations were identified and supported with case management services.

WASH

Under humanitarian programming UNICEF Pakistan was able to reach over 3.0 million people with access to water, over 678,000 with sanitation and approximately 2.2 with improved knowledge and capacity to practice good hygiene behaviour. These results encompassed the WASH response to a cholera outbreak in various parts of the country and and large-scale flooding resulting from heavy monsoon rains.

Humanitarian Context

In 2022, Pakistan faced several emergency situations, particularly floods, COVID-19, Acute Watery Diarrhoea (AWD), economic deterioration, and political unrest.

COVID-19

Since the beginning of January till March/April, Pakistan went through the fifth wave of COVID-19 cases, which gradually declined (positivity reached less than 1 per cent; 208 cases on 1st April). May and most part of June continued with lower numbers reported (daily positive cases remained below 100). From mid-June the number of cases increased with positivity going up to 3.93 per cent by the end of the month (694 cases on 30th June). This was primarily due to non-adherence to COVID-19 Standard Operating Procedures (SOPs). The country went through the sixth wave of COVID-19 and the government reinforced implementation of COVID-19 SOPs. More than 88 per cent of the target population has received the first dose of COVID-19 vaccine and 84 per cent is fully vaccinated. Booster doses are also being administered. As of the end of the year, 132,512,764 people (84 per cent of the population) had been fully vaccinated in the country.

Floods

During the monsoon season, between June and August, torrential rains - equivalent to nearly 2.9 times the national 30-year average — and a combination of riverine, urban, and flash flooding led to a record flood in which one-third of the country covering 94 districts was inundated. The widespread flooding and landslides had severe repercussions for human lives, property, and infrastructure. Around 33 million people were affected, and nearly 8 million people were reportedly displaced. Because of the floods, 1,739 people lost their lives (including 647 children), 12,867 were injured (including 4,006 children) and more than 2.2 million houses were damaged (partially damaged:1,391,467 and fully damaged: 897,014).

As part of Floods Relief Cash Assistance, the Government of Pakistan disbursed PKR 66.94 billion (approximately USD 290.3 million) among the affected families reaching 2,759,601 beneficiaries. An estimated 20.6 million people, including 9.6 million children, need humanitarian assistance. Many of the hardest-hit districts are amongst the most vulnerable districts in Pakistan, where children already suffer from high malnutrition, poor access to water and sanitation, low school enrolment, and other deprivations. As per the PDNA, beyond the increase of monetary poverty, estimates indicate an increase in multidimensional poverty from 37.8 percent to 43.7 percent, meaning that an additional 1.9 million households will be pushed into non-monetary poverty. This entails significant increased deprivations around access to adequate health, sanitation, quality maternal health care, electricity, and loss of assets. Multidimensional poverty will increase by 13 percentage points in KP, followed by 10.9 in Balochistan, and 10.2 in Sindh province. The northern areas of Khyber Pakhtunkhwa (KP), northern Balochistan province, Gilgit Baltistan (GB) and Pakistan Administered Kashmir (PAK) region, receive snowfall and temperatures fall below 0°C. The coldest places in Pakistan usually are the glacial areas of GB, where during winters the average temperature remains below -20°C. Many of these districts/areas have also been affected by floods which means that their populations face extreme cold weather conditions in damaged/shelter or alternative homes.

Acute Watery Diarrhoea

During 2022 Pakistan reported an increased number of cases of acute watery diarrhea from all the four provinces. UNICEF closely monitored the situation and had prepositioned Health, WASH and Nutrition supplies in the provinces. Water testing had been ongoing in hotspot districts in all four provinces. UNICEF is providing nutrition services through integrated services to the population affected by acute watery diarrhea in Balochistan and Khyber Pakhtunkhwa.

Humanitarian Results

Humanitarian Coordination

UNICEF continued to scale up its response to the floods and is targeted 6.4 million most affected people, including nearly 4.4 million children with critical life-saving interventions, aligned to the Interagency 2022 Flood Response Plan and sector priorities. UNICEF reached the most vulnerable children and women with an integrated package of life-saving services across health, nutrition, WASH, education, and child protection (including gender-based violence) and leveraged its development program and resources. Key cross-cutting actions, such as protection against sexual abuse and exploitation, social and behaviour change, community engagement, and accountability to affected populations, have been strengthened, and streamlined across all sectors.

UNICEF commits to strengthening humanitarian leadership and coordination at national and subnational levels through its co-leadership of the WASH, education and nutrition sectors and the child protection area of responsibility and its engagement in the health sector.

Maternal, Newborn and Child Health

UNICEF Pakistan as part of the continued COVID-19 response in the first half of the year, supported the continuation of essential health services, capacity building of frontline workers, provision of basic Personal Protective Equipment (PPEs) and essential supplies. In addition, UNICEF supported IPC and paediatric case management of COVID-19. UNICEF also facilitated, the introduction and scaling up of COVID-19 vaccination and strengthened the cold chain capacity in the country through the COVAX facility. UNICEF supported provincial and regional health departments to ensure continuity of essential primary healthcare (PHC) services, including immunization, ante-natal care, post-natal care, service delivery, childcare, and curative care for adults, in the 136 UNICEF supported health facilities during the year. UNICEF-supported IPC training reached frontline health workers and Clinical Management of Children with COVID-19 training was provided to paediatricians. UNICEF also supported government in importing paediatric doses of COVID-19 Pfizer vaccine and its rollout. The consumption of paediatric doses is recorded at 94 per cent of the target population.

With the onset of the floods, UNICEF diverted its health response focus (from COVID-19 response) to immediate PHC services by establishing Mobile Health Teams and static camp sites in partnership with the District Health Department. These teams comprised of government staff who have been provided incentives, additional medicines, and mobility support. Mobile health teams have been providing essential health services, sustaining coverage of high-impact preventive and curative interventions to women, children, and adolescents. A total of 1,547,987 people (427,106 girls, 400,574 boys, 400,030 women and 320,277 men) have benefitted from the primary health services through 114 mobile health teams and static camps. Moreover, 1,091,951 children (577,130 girls, 514,821 boys) received immunization against measles and 48,544 pregnant women have been provided antenatal care services.

UNICEF has identified local implementing partners/CSOs to expand the number of mobile health teams and to support and static health facilities. More than 2,000 health facilities have been damaged due to floods, resulting in disruption of essential PHC services. UNICEF is supporting the rehabilitation, repair, and provision of equipment of 109 Health facilities and 5 district warehouses. This will ensure the continuation of health services including Basic Emergency Obstetric and New-born Care services and strengthening referral care for

complicated cases. UNICEF has also raised sales orders for the 7,000 LHWs kits and an additional 3,000 kits will be procured as soon as the funds are available.

UNICEF has completed the cold chain equipment assessment and has replaced/repaired faulty equipment to ensure the vaccines are stored in proper cold chain. The support includes provision of oxygen equipment and training of service providers on management of ARI and oxygen management guidelines in addition to Integrated Management of Neonatal and Childhood Illness (IMNCI), management of paediatric emergencies and mental health and psychosocial support.

In response to the cases of malaria and dengue, UNICEF provided Anti-malarial drugs to treat 415,000 patients, LLINs for 78,000 people and 50,000 rapid testing kits for diagnosis of malaria and dengue. In response to the AWD outbreak in Pakistan, UNICEF provided capacity building support for Lady Health Supervisors on the IMNCI, guided Management of diarrhoea; distribution of Doxycycline, ORS and Zinc to target Health Facilities (HF) in Sindh (6) and Balochistan (10); provision of supplies for KP and Punjab provinces; establishment of 230 oral rehydration therapy (ORT) corners in health facilities (Sindh 6; Balochistan 274; Punjab 150); provision of masks and sanitizers in Peshawar; provision of supplies for Diarrhoea Treatment Units (DTUs). A total of 17 Interagency Emergency Health Kits (IEHK) have been provided for AWD response in Swat and Malakand, including 15 prepositioned kits in hotspot districts.

Table 1: Results in 2022

Indicators	Sect	or	UNICEF		
Indicators	2022 Target	Results	2022 Target	Results	
People accessing public health facilities			3,200,000	1,547,987	
Children vaccinated against measles			736,000	1,091,951	
Children received polio vaccination			2,543,121	16,415,222	

Nutrition

UNICEF continued coordination with Ministry of National Health Services Regulations and Coordination (MoNHSR&C) and respective provincial health departments along with other UN agencies (WFP, WHO, UNOCHA, UNHCR) with the engagement of CSOs to support the humanitarian nutrition response. Through the year 51 Nutrition Working Group (NWG) meetings held; 13 at the National level and 38 at the sub-national level (Sindh 10; KP 7; Punjab 6; and 15 in Balochistan).

UNICEF maintained stock for 150,000 people in need with contingency partnership agreements at the start of the year. However, considering Pakistan's high acute malnutrition levels for children under 5 (well above emergency thresholds), its climate vulnerability (to both frequent droughts and floods), and its poor economic situation, a preparedness level of at least 300,000 people is required.

During the year, In COVID-19 response, Nutrition admitted 146,484 children (66,731 girls and 79,753 boys) for SAM treatment through 2,920 Outpatient Therapeutic Programme (OTP) sites and 187,751 children (103,822 girls and 83,929 boys) provided with MNPs for the prevention of malnutrition. 668,153 mothers/caregivers were provided with Infant and Young Child Feeding (IYCF) counselling practices in the COVID-19 context through Lady Health Workers (LHWs) and other community-based networks.

This pre-existing crisis was superseded by the catastrophic flood emergency, affecting approximately 1.6 million SAM boys and girls and 1.2 million malnourished Pregnant and Lactating Women (PLW). To respond to the resulting nutrition emergency, 925,392 (470,407 girls and 454,985 boys) children have been screened for malnutrition across 49 flood-affected districts, 71,374 children (39,597 girls and 31,777 boys) have been identified as SAM with a national prevalence of 8 per cent. Out of those SAM children, 68,857 (38,267 girls and 30,590 boys) have been admitted for SAM treatment in 1,250 OTP sites with a 4 per cent missed children indicating to strengthen community outreach and a high enrolment ratio of 96 per cent. 203,745 children aged 6 to 59 months provided MNPs (104,287 girls and 99,458 boys) and 700,792 primary caregivers (with the possibility of double counting) for children aged 0 to 23 months provided with IYCF counselling practices.

Additionally, 1.5 million SAM children (97 per cent of the target) are still in need of treatment. Therefore, to rapidly scale-up the response in flood-affected districts and to enhance community reach through LHWs, UNICEF continued to work with the Government and all partners to build capacity on the simplified protocols for the management of wasting.

Table 2: Results in 2022

	Sector		UI	NICEF
Indicators	2022 Target	Results	2022 Target	Results
Children aged 6 to 59 months with severe acute malnutrition admitted for treatment - Girls - Boys	414,175	68,857 Girls: 38,267 Boys: 30,590	414,175	68,857 Girls: 38,267 Boys: 30,590
Primary caregivers of children aged 0 to 23 months receiving infant and young child feeding counselling	777,559	700,792	777,559	700,792
Children aged 6 to 59 months receiving multiple micronutrient powders - Girls - Boys	583,169	203,745 Girls: 104,287 Boys: 99,458	583,169	203,745 Girls: 104,287 Boys: 99,458

Water, Sanitation and Hygiene

In 2022, WASH started the emergency response in the month of May by responding to Cholera out-break in provinces of Sindh, KP and Baluchistan. UNICEF supported PCRWR and PHED for water quality testing of more than 2,200 samples this was followed by partnership with different line agencies for chlorination of contaminated sources along with hygiene promotion messages. In Sindh, in partnership with KWSB and PCRWR, UNICEF ensured availability of safe drinking water in three districts of Karachi through chlorination of an average of 82 million gallons of water every day at 10 pumping station, serving an estimated 7.5 million people daily. In Baluchistan UNICEF supported PHED and PCRWR for installation of water filtration unit at Jhal Magsi and chlorination of other water sources. In KP UNICEF supported PCRWR and PHED for chlorination of water supply systems in District Swat. The chlorination was followed up by free and residual chlorine samples testing at 450 points every day. As supplement to chlorination 85,000 people were reached with hygiene messages through hygiene session.

The WASH flood response kicked off in August in the provinces of KP and Baluchistan, followed by Punjab and Sindh, scaling up the response to WASH needs among flood affected women, children, and men in 30 districts. During the first 3 months of the crisis,

UNICEF supported the provision of access to emergency water services, temporary sanitation, and hygiene facilities, in addition to the distribution of hygiene related non-food items. This assistance was continued in critical areas where water was still standing and communities remain displaced, unable to return to their homes. Additionally, UNICEF has expanded coverage to communities as they return home to villages that lack basic access to WASH services, working with WASH service providers, civil society, and the private sector with the aim of restoring access to life-saving WASH services with a sustainable lens.

Through UNICEF support, 1,173,251 people, including 267,993 girls, 279,460 boys, 307,850 women and 317,948 men, have been reached with access to safe drinking water through water tanks and installation of water filtration plants. In addition, 627,904 people (137,276 girls, 147,921 boys, 167,101 women and 175,606 men), have been reached with hygiene promotion messages, and 1,163,323 people received menstrual hygiene kits that cater for the menstrual hygiene needs of women and adolescent girls, or soap and additional WASH non-food items (NFIs). An estimated 85,354 people (14,945 girls, 15,463 boys, 17,329 women and 17,803 men) have benefited from temporary gender-segregated latrines. Support to vulnerable households with restoration of household sanitation facilities has so far benefited 17,552 households.

Along with response to natural emergency, UNICEF also supported Afghan refugees under the refugee response plan (RRP) in coordination and collaboration with UNHCR and CAR. Under RRP 645,919 people (147,806 girls, 153,839 boys, 168,695 women and 175,580 men) were provided with access to sufficient quantity of safe water for drinking and domestic needs through rehabilitation, repair, improvement and solarization of existing and new water supply systems. 290,457 people (66,465 girls, 69,178 boys, 75,859 women and 78,955 men) were provided safe and appropriate sanitation facilities, and 1,105,138 people (252,889 girls, 263,211 boys, 288,629 women and 300,410 men) were reached critical WASH message.

In support of WASH Sector coordination, UNICEF has led sector coordination in cooperation with government counterparts at national level, in all provinces, and in 3 provincial hubs, engaging a dedicated WASH sector coordinator and information manager to support coordination at all levels. UNICEF established technical working groups on priority topics, and development of guidelines and standards for the sector response. As WASH sector lead, UNICEF is undertaking a gender safety audit and post-distribution monitoring (PDM) to guide further response and learning. UNICEF worked closely with UNDP, the WB, and ADB to ensure appropriate representation of WASH needs in the 4RF.

Table 3: Results in 2022

Table J. Nesults III 2022				
Indicators	Sec	tor	UNIC	CEF
indicators	2022 Target	Results	2022 Target	Results
# of people accessing a sufficient quantity of safe water for drinking, cooking and personal hygiene	3,257,580	1,780,613	2,000,000	1,173,251
# of people accessing appropriately designed and managed latrines	2,077,722	148,559	440,000	102,906
# of people reached with messages on safe and hygienic practices	3,833,590	794,202	2,400,000	627,904
# of people reached with critical WASH Supplies (including hygiene items and MHH)	3,833,590	1,790,352	2,400,000	1,163,323
# of schools and learning centres provided WASH facilities.	1,300	192	510	162
# of health care centers provided with WASH facilities.	380	29	100	25
Refugee Response	•	•		
# people accessing a sufficient quantity of safe	1,194,628	1,281,883	816,000	645,919

water for drinking and domestic needs				
# people use safe and appropriate sanitation facilities	764,802	529,453	479,400	290,457
# people reached with critical WASH messages	2,293,978	1,378,097	1,430,000	1,105,138

Education

UNICEF continued to support as co-lead of Education Sector Working Group (ESWG) to respond to Education in Emergencies, in coordination with Federal and Provincial Education ministries/departments and humanitarian organizations, UN agencies and development partners for continuity of learning during school closure and adherence to SOPs (Standard Operating Procedures) for safe re-opening of schools.

As a part of a capacity building plan, the ESWG conducted a two-day training session on Education in Emergencies, with technical and financial support from UNICEF in Quetta, Balochistan, with the collaboration of School Education Department (SED). The training was focused to strengthening knowledge and skills of ESWG members on coordination, preparedness, needs assessment /analysis, harmonized response planning, implementation, school safety plan and monitoring of Education in Emergency (EiE). The training was attended by 30 EiE Sector Working Group (ESWG) members, including representatives of the School Education Department of Balochistan, UN, INGOs, CSOs. The next steps are to revamp EiE/DRR working group in Balochistan, develop contingency planning and, a document on EiE best practices.

In regard to COVID-19 emergency, UNICEF worked with national and local education authorities to ensure safe school operations through the implementation of SOPs, guidelines and the use of appropriate training manuals/packages. In total 16,481 (6,732 women) teachers and Education officers were trained across Pakistan on safe reopening and operation of schools. In Sindh, 3,313 members of Village Education Committee (VECs) (462 women) were trained on safe reopening of schools. In addition, 22,588 (women:10,158) were trained on Mental Health and Psychosocial Support across Pakistan.

To encourage learning activities of students, 587,341 parents were reached with encouraging messages for enrolment/ attendance of children through SMS and different social media platforms across Pakistan. In Sindh, a series of SMS on vaccination for teachers/education officials and COVID-19 SOPs for safe school reopening were sent to 40,589 teachers/education officials (15,412 females). Messages through SMS were also sent to 147,947 parents/guardians of students on vaccination and COVID-19 SOPs related to educational institutions.

UNICEF supported 55 schools with temporary accommodation, and a temporary learning centre enabled 36 girls to continue learning after the Harnai, Balochistan earthquake. As lead agency for disaster risk reduction (DRR), UNICEF supported the KP Education Department School Safety Cell; mock drills in disaster-prone schools benefited 240,000 students (118,000 girls), and a tree plantation campaign mobilized 238,727 children.

UNICEF has been engaged with the Ministry of Federal Education and Professional Training (MoFE&PT) to deliver supplies in 12,000 schools to minimize Covid-19 infection risk. Furthermore, 6,538 schools received infection prevention and control (IPC) supplies reaching 201,439 children (53 per cent girls).

UNICEF continued to support dissemination of student vaccination resources, including fliers, posters, and banners. In addition, as support to the Digital Learning Initiative, a rubric

for teachers and students is under finalization, and training for implementation in 10 pilot schools is planned. Procurement of IT material is completed, and training manual is finalized by education department.

As part of the flood emergency response in 2022, UNICEF reached 124,461 children (52,457 girls) through the provision of safe, inclusive, and accessible learning opportunities. A total of 996 TLCs (Temporary Learning Centres) were established, across Balochistan, Punjab and Sindh provinces, equipped with teaching and learning and recreational materials, and reaching 86,009 children (37,181 girls).

Teachers in these TLCs have been provided by respective provincial education departments and district education officials. Beyond learning continuity, TLCs have provided an invaluable opportunity to children who had never attended school. In Sindh, around 40 per cent children attending TLCs are first time learners. UNICEF has also employed mechanisms to keep children in school as families move and return to their villages.

About 38,452 children (15,276 girls) have been able to return to their classrooms in Balochistan and KP through the dewatering, disinfection, and cleaning of their schools.

Social media and mass communication messages on back to learning have reached 75,397 people (including 32,056 girls and women) and continue to improve communities' awareness on safe learning opportunities.

Teacher training on mental health and psychosocial support (MHPSS) continues, with 112 teachers (44 females) trained so far. In addition, 1,414 members (589 females) of PT/SMC (Parent Teacher/School Management Committee) have been trained on MHPSS and safe reopening of schools. As co-coordinators of the Education Sector Working Group (ESWG), UNICEF supported fortnightly and monthly provincial and district level coordination meetings in Punjab, Sindh and Balochistan.

Table 4: Results in 2022

	Sector		UNICEF	
Indicators	2022 Target	Results	2022 Target	Results
# of children (3-16+ years, girls/boys) benefitting from prefabricated structures in locations with fully damaged schools	20,280	0	12,168	0
# of children (3-16 + years, girls/boys) benefitting from schools dewatered, cleaned and disinfected	644,213	5,167	386,527	38,452
# of children (3-16 + years, girls/boys) receiving school supplies	638,164	15,509	383,000	18,589
# of children (3-16 +years, girls/boys) benefitting from TLCs and alternate learning modalities	202,800	31,587	383,000	86,009
# of children (3-16 + years, girls/boys) benefitting from schools' rehabilitation	375,084	0	225,050	0
# of children (3-16 + years, girls/boys) benefiting from winterisation kits distributed	270,400	500	162,240	0
# of teachers and education personnel trained (female/male) on PSS, multi-grade teaching and teaching in emergencies	20,826	0	12,496	112
# of SMC members (female/male) trained on PSS and safe reopening and functioning of schools	40,597	0	24,358	1,414
# of children (3-16 + years, girls/boys) enrolled in school following the results of the back-to-school campaigns	577,884	2,495	364,730	0
# of TLC established	2,535	90	1,521	996

Child Protection

UNICEF and partners provided children, families, and communities with interventions to prevent and respond to distress, violence, abuse, and exploitation in response to COVID and the floods in Sindh, Baluchistan, Punjab and KP provinces.

For the COVID-19 response in early 2022, UNICEF and its partners trained a total of 1,734 social workforce professionals (894 women and 840 men) in psychosocial support and stigma prevention in all the provinces. A total of 16,542 children, caregivers, and other community members (2,940 girls, 2,594 boys, 5,780 women and 5,228 men) received psychosocial support from trained social workforce professionals in Punjab, KP, Sindh and Baluchistan. A total of 129,163 people were reached through messages on stigma and violence against children during 2022. Child protection services were provided to 655 children (149 girls and 506 boys) through UNICEF support.

In response to the flood emergency, UNICEF activated 10 partnerships with civil society organizations to bring child protection services to flood-affected children and families in Sindh, Balochistan, Punjab and KP. UNICEF supported the Social Welfare Departments to expand the district Child Protection Units (CPUs) to provide services for children at risk and survivors of protection violations. This included the deployment of case workers and psychologists, who provided to 1,077 child victims (514 girls and 563 boys). A total of 266,048 children and parents/caregivers (110,824 girls, 113,507 boys, 25,628 women, 16,029 men) received Psychosocial Support (PSS) through static and mobile modalities. PSS activities were reinforced through a suite of innovative tools such as a new household level PSS kit, along with guidance materials for caregivers. In addition, a new flood specific Psychological First Aid guidance document was launched to support frontline workers in the field.

During 2022, 1,528,195 people (292,910 girls, 292,437 boys, 595,425 women, 347,123 men) were reached through awareness activities and UNICEF supported community mobilization interventions on key child protection risks and available services. This includes people reached directly through face-to-face interventions and indirectly reached via radio, TV, and social media platforms. Gender Based Violence (GBV) risk mitigation, prevention and/or response services reached 56,953 children and women (19,864 girls, 21,532 boys and 15,557 women). New tools have been developed for community engagement on child protection and GBV in local languages to reinforce these efforts. Efforts continued to build the capacity of government and CSOs through thematic child protection and GBV trainings.

The births of 36,978 children (17,150 girls and 19,828 boys) in flood affected areas were registered with UNICEF support, which is a major step in ensuring their legal identity and access to services.

In 2022, UNICEF continued to lead the Child Protection Area of Responsibility at national and provincial levels for strong coordination and to promote a harmonized response strategy aligned with minimum standards.

Thematic humanitarian funding was critical to achieving results by helping to alleviate chronic under-funding for child protection and GBV. Thematic funding ensured UNICEF could address the holistic needs of children affected by COVID and the floods and build on investments made in government child protection systems. UNICEF contributed to results achieved primarily by providing technical assistance to government, partnerships with CSO and funding to both government and CSOs.

Table 5: Results in 2022

Indicators	Sector		UNIC	CEF
	2022 Target	Results	2022 Target	Results
Children and parents/caregivers accessing mental health and psychosocial support	300,914	266,048	300,914	266,048
Girls and boys receiving individual case management and specialized services.	3,143	1,077	3,143	1,077
Boys, girls, women, men reached through awareness activities and UNICEF-supported community mobilization interventions on key child protection risks and available services.	3,106,817	1,528,407	3,106,817	1,528,407
Women, girls, and boys accessing GBV risk mitigation, prevention, or response interventions.	617,500	56,953	617,500	56,953

SBC and Community Engagement

Until end of July 2022, and under direction of the COVID-19 National Command and Operational Center (NCOC), the Risk Communications and Community Engagement (RCCE) Task-Force teams remained mostly focused on the uptake and promotion of COVID-19 vaccines. With multiple challenges sourced on historical and negative perception of vaccines, the communication strategy focused on rebuilding trust in government intentions as well as addressing the safety of all COVID-19 vaccines. Uptake of vaccination among women was 35% less than adult males. To understand the reasons, Social and Behavior Change (SBC) surveys were conducted which led to the hiring of 370 women vaccinators to accommodate women during vaccination sessions, instead of being touched by unfamiliar male vaccinators. In addition, a differentiated campaign strategy was developed and implemented to promote vaccination among adolescents, who are rarely targeted by Immunization programs.

UNICEF support to the COVID-19 helpline was a key factor in building trust between the government and the population, as well as support the overall management of the pandemic, as it successfully informed callers on vaccination eligibility, process, locations, and information regarding vaccines and their safety.

To create a positive and enabling environment around the benefits of vaccines, over 90 million people were reached through mass and social media platforms. The strategy also focused on community engagement, participatory approaches, and a strong partnership with faith leaders.

In July and August, the UNICEF SBC teams supported the Cholera outbreak in Baluchistan, Sindh, and Punjab provinces. During this period, 422 Community engagement and advocacy sessions were conducted with caregivers and community influencers, (parents, religious leaders, political activists, associations), 135 school/college awareness sessions were completed, 168 awareness vehicles were mobilized, and over 2,500 mosque announcements were conducted in vaccination areas. In addition, Unicef supported the printing and distribution of 621,000 flyers, and 1,700 banners to promote the Oral Cholera Vaccination campaign in targeting hotspots.

For the flood response, the rollover of investments made from Covid-19 were immediately integrated into the SBC flood response strategy. This includes support in leadership and coordination at both Federal and provincial levels, data and social analytics with anthropological support, community engagement, and capacity building for implementing partners and front-line workers.

So far, 23 million were reached through mass & social media with early recovery messages, 47,000 people shared their concerns and asking questions/clarifications through established feedback mechanisms, and 230 rapid-assessments of flood-affected populations were conducted. This includes in-depth interviews and focus group discussions with the affected population and implementing partners.

UNICEF's Social and Behaviour Change (SBC) activities continue to assess and provide critical and timely information aimed to help communities resettle in their respective villages. Two social anthropologists continue to provide critical analysis and recommendations to managers and implementing partners, heling adapt approaches to best reflect the needs and concerns of the affected population.

Table 6: Results in 2022

Indicators	Sector		UNICEF	
inuicators	2022 Target	Results	2022 Target	Results
People reached (one-way comms) with messages on prevention and access to services			25,000,000	22,636,379
People participating in 2-way engagement events			2,500,000	3,464,933
People who shared their concerns and received clarification through established feedback mechanisms			3,500,000	46,815

Advocacy and external communication

During the first half of 2022, A&C Section continued to implement the 2018-2022 Advocacy, Communication & Social Mobilization Strategy, aligned with UNICEF's global & regional strategies. In total, the Section supported organisation of 27 events, produced 80 videos, 14 stories, 13 press releases, 3 Geneva Palais briefings, and organized several senior level visits including that of the UNICEF Executive Director, besides regional and global directors and several NatComs. Projection of Covid19 vaccines being procured by UNICEF and supplied to the Govt. of Pakistan, also continued.

The country office achieved significant growth on social media, reaching 473 million impressions and 45 million video views during the year. The number of followers increased by 100% on Twitter (240,000 followers), 25% on Facebook (950,000) and remained stable on Instagram (170,000).

In the second half of the year, UNICEF focused on the emergency response to catastrophic floods, highlighting the urgent humanitarian needs of children and developing a narrative focusing on the child survival crisis and its link to climate change to support advocacy and resource mobilization. We highlighted UNICEF's procurement of goods and services, the programmatic response on the ground, and donor contribution from both the public and private sectors. Multiple videos, pieces to camera and social media posts were produced and disseminated, and more than 100 interviews given -- a majority of them to international media. This resulted in UNICEF having a 54% share of voice about the floods on digital media. We worked very closely with PPD, PFP and several NatComs, coordinating our advocacy, donor visibility and resource mobilization strategies with them for maximum results and impact.

Preparedness, Resilience and Disaster Risk Reduction

UNICEF provided advocacy, capacity building and technical support to enhance readiness for multi-hazard scenarios. With UNICEF support, NDMA organized a Community Based Disaster Risk Management training of trainers in Swat, benefiting 39 officials from KP and GB. UNICEF supported NDMA in showcasing Pakistan experiences in the Asia Pacific Coalition for School Safety (APCSS)'s Partner Event, at the Asia Pacific Ministerial Conference on Disaster Risk Reduction (APMCDRR) 2022 in September.

UNICEF updated the Global Online Emergency Preparedness Platform with 33 contingency humanitarian partnership agreements. Long-Term Agreements (LTAs) for locally procured supplies were prepared. Pre-positioned supplies for 150,000 people in a multi-hazard scenario were instrumental in timely flood emergency response.

By end of the year winter season had been at its peak with temperatures in parts of KP province, Balochistan, PAK and GB dropping below 0°C. While people have been gradually returning to their damaged or destroyed homes in places where water has receded, they face challenges of extreme cold weather in their damaged homes or temporary shelters near their homes.

As part of the ongoing preparedness, UNICEF supported nearly 300,000 people, particularly children, with 32,000 warm clothing kits (infants and children up to 12 years), 80,000 blankets, 25,000 quilts, 20,000 jackets for children, 10,000 shawls for women and 20,000 woollen caps which are being distributed to the prioritized floods affected and snowbound/cold weather affected communities of Balochistan, KP, Sindh and Punjab provinces and GB region.

Prevention of Sexual Exploitation and Abuse

Sexual Exploitation and Abuse (SEA) is unacceptable breach of fundamental human rights and a deep betrayal of UNICEF's core values. Considering the high risk of SEA emanating from the disaster, since the onset of the emergency, UNICEF and its Implementing Partners have implemented several interventions to strengthen prevention, reporting and response to SEA. 8,554 frontline workers (3,957 women and 4,589 men) have been trained on PSEA through the online mandatory training and face-to-face training sessions. The trained frontline workers now know what constitutes SEA. They are aware of the prohibited standards of behavior, where and how to report SEA misconduct. UNICEF also supported its implementing partners to develop contextualized PSEA messages and Information, Education and Communication (IEC) materials. Since the beginning of the response, 2,295,120 people (294,603 girls, 285,571 boys, 876,902 women, 838,044 men) in UNICEF supported project implementation sites have been reached with PSEA messages.

UNICEF partners also deployed multiple channels for safe and accessible reporting of SEA. 2,117,698 people (257,978 girls, 246,603 boys, 827,145 women, 785,972 men) have had access to channels for safe and accessible reporting of SEA. UNICEF also continued to provide support to the inter-agency PSEA Taskforce to strengthen collective accountability on PSEA. Owing to its active engagement, UNICEF was officially installed as the co-chair of the Inter-agency PSEA Taskforce. The new role now provides more space to UNICEF to influence policy and implementation of PSEA across the UN agencies and Civil Society Organizations particularly participating in the humanitarian response.

Assessment, Monitoring and Evaluation

Robust mechanisms are in place for humanitarian performance monitoring and situation reporting in line with EMOPS guidance and the Core Commitments for Children. This includes monitoring, information flow and reporting mechanisms from implementing partners, results-based performance reporting and timely course corrections. Field monitoring mechanisms are aligned with Harmonized Approach to Cash Transfer (HACT) and global guidelines, which contributed to HACT compliance and timely course corrections.

For humanitarian performance monitoring, UNICEF relied on partner reporting, UNICEF staff reporting including through field visits and follow-ups, and third-party monitoring. The findings from these sources fed into planning and course corrections, and monitor the timely planning, implementation and use of funds. They enabled UNICEF to resolve bottlenecks, leverage resources and explore partnerships for greater impact and results, and ensure accountability to affected communities. Both quantitative and qualitative data were collected, at intervals that depended on the nature and intensity of the situation.

Complaints and grievances were received from communities through community volunteers, committee members and toll-free numbers. Where possible, these were addressed on the spot and escalated to higher forums if and when needed. This helped to build community trust and confidence in the programme. A complaint redressal system was adopted with complaint phone numbers clearly displayed on banners. These numbers were also provided at community meetings and distribution points.

UNICEF Pakistan has permanent field offices in all four of the most heavily flood affected provinces and has been working with the Government of Pakistan, other UN agencies, and NGO partners to respond to the needs of the most vulnerable populations in 87 of the government-declared 94 calamity affected districts (92 per cent), both for displaced populations and those returning to their communities. Four operation hubs (Sukkur and Hyderabad in Sindh, Sibbi in Balochistan, and Multan in Punjab) have been established to bring UNICEF operations and programme delivery closer to the hardest hit areas. The flood response was boosted by UNICEF's surge capacity, drawing on expertise within the country office, the regional office and globally. UNICEF has been leading sectoral coordination in the WASH, Nutrition and Education sectors and Child Protection sub-sector from the beginning of the response.

Financial Analysis

Table 7: Funding status against the appeal by sector in 2022 (US\$)

	- gamerane	Funds ava	Funding gap			
Sector	Requirement	Funds received in 2022	Other resources utilized in 2022	Total	\$	%
Health	35,000,000	7,623,104	4,349,410	11,972,514	23,027,486	66
Nutrition	34,669,042	16,615,562	2,072,184	18,687,746	15,981,296	46
Education	23,290,028	4,517,858	4,869,564	9,387,422	13,902,606	60
Child protection	11,262,494	4,120,693	770,372	4,891,065	6,371,429	57
Water, Sanitation & Hygiene	58,320,324	14,794,298	1,725,000	16,519,298	41,801,026	72
Emergency preparedness	11,000,000	4,553,562	4,000	4,557,562	6,442,438	59
Total	173,541,888	52,225,077	13,790,530	66,015,607	107,526,281	62

^{*} Funds available include funds received against current appeal and carry-over from previous year.

Table 8: Funding received and available by 31 December 2022 by donor and funding type (US\$)

type (US\$)		
Donor Name/Type of funding	Grant reference	Overall amount
I. Humanitarian Funds received in 2022		
a.) Thematic Humanitarian Funds		
Global Humanitarian Thematic Fund	SM189910	158,286
Global Humanitarian Thematic Fund	SM229910	695,500
Regional Humanitarian Thematic Fund	SM229920	0
Country Humanitarian Thematic Fund	SM229930	7,076,575
	ic Humanitarian Funds	7,930,361
b.) Non-Thematic Humanitarian Funds		
Netherlands	SM220822	17,489,712
German Federal Foreign Office	SM220788	7,238,883
SIDA-Sweden	SM220676	4,221,382
USA (State) BPRM	SM220076	3,693,570
European Commission/ECHO	SM220810	2,481,903
UNHCR HQ	SM220799	2,000,000
Japan	SM220093	1,796,324
Japan	SM220663	1,000,000
Republic of Korea	SM220758	1,000,000
Romania	SM220746	72,674
	tic Humanitarian Funds	40,994,448
c.) Pooled Funding	io frantamanan anao	40,004,440
CERF	SM220621 SM220653	3,834,269
Consolidated Funds from NatComs	SM220564 SM220678 SM220793 SM220794 SM220795 SM220894 SM220878	1,254,162
PSFR - consolidated pool funding	SM220766	21,558
International on-line donations	SM2208970001	3,084
	Total Pooled Funding	5,113,073
d.) Other types of humanitarian funds		
Danish Committee for UNICEF	KM220104	103,500
	of humanitarian funds	103,500
e.) Other resources - development funding towards H.	AC (SH grant)	0
f.) Other resources - development funding towards H.	AC (SC grant)	0
Education Cannot Wait Fund	SC220626	2,500,000
Norway	SC220436	329,905
Total humanitarian funds received in 20		56,971,287
II O anno accombana anticatan for da accellable in 2000		
II. Carry-over humanitarian funds available in 2022 g.) Carry over Thematic Humanitarian Funds		
2018-2021 Humanitarian Action Thematic Pool	SM189910	424,390
2018-2021 Humanitarian Action Thematic Pool - COVID-19	SM209910	23,256
2010 2021 Humanian Action Thematic Foot - GOVID-19	31V1200010	20,230
h.) Carry over Non-thematic Humanitarian Funds		
European Commission/ECHO	SM210874	878,950
European Commission/ECHO	SM200583	397,079

USA (State) BPRM	SM210714	686,019
i.) Carry over other humanitarian funds		
United Kingdom	KM210069	1,248,816
USAID/Food for Peace	KM200008	155,754
Total Carry-over humanitarian fun	ds	3,814,264
III. Other sources		
Reprogrammed Regular Resources (RR)	Non-grant	6,899,799
7% Set-Aside/Pakistan Life Saving Services for Flood	GS220011	5,000,000
	GE220016	3,100,000
EPF	GE220018	500,000
EPF	GE220019	500,000
	GE220022	5,000,000
Working Capital Advance	GW220001	8,000,000
Total other sources		28,999,799

^{*} Programmable amounts of donor contributions, excluding recovery cost.

Table 9: Thematic Humanitarian Contributions Received in 2022 (in US\$)

Grant Number SM189910 SM229910	Programmable Amount 150,000	Total Contribution Amount 158,286
SM229910	,	158,286
	650,000	695,500
Subtotal	800,000	835,786
SM2299300181	2,017,228	2,118,090
SM2299300182	1,333,255	1,399,918
SM2299300196	805,343	845,610
SM2299300215	6,488	6,813
SM2299300233	95,238	100,000
SM2299300184	657,511	690,387
SM2299300208	326,189	342,499
SM2299300195	320,505	336,531
SM2299300217	319,806	335,796
SM2299300186	189,103	198,558
SM2299300185	160,347	168,364
SM2299300194	198,945	208892
SM2299300218	92,285	96,899
SM2299300209	79,830	83,821
SM2299300213	88,717	93,152
SM2299300221	10,588	11,117
SM2299300214	38,217	40,128
Subtotal	6,739,595	7,076,575
	7,539,595	7,930,361
	Subtotal SM2299300181 SM2299300182 SM2299300196 SM2299300215 SM2299300233 SM2299300208 SM2299300195 SM2299300195 SM2299300186 SM2299300186 SM2299300185 SM2299300194 SM2299300218 SM2299300218 SM2299300218 SM2299300213 SM2299300214 Subtotal	Subtotal 800,000 SM2299300181 2,017,228 SM2299300182 1,333,255 SM2299300196 805,343 SM2299300215 6,488 SM2299300233 95,238 SM2299300184 657,511 SM2299300208 326,189 SM2299300195 320,505 SM229930017 319,806 SM2299300186 189,103 SM2299300185 160,347 SM2299300218 92,285 SM2299300209 79,830 SM2299300213 88,717 SM2299300214 38,217 Subtotal 6,739,595

^{*}International Aid Transparency Initiative (IATI) requires all grants to be listed in reporting. http://iatistandard.org/
† Global Thematic Humanitarian Funding contributions are pooled and then allocated to country and regional offices by EMOPS. A detailed list of grants will be available in the 2022 Humanitarian Action Global Annual Results Report.

Future Workplan

UNICEF Pakistan aims to provide continued multisectoral support for the flood response and recovery, address the country's long-standing nutritional emergency and build resilience to natural and human-made shocks.

UNICEF depends on adequate and timely funding to provide critical multisectoral support to children and families who continue to be affected by the pandemic and to prepare for risks related to climate change impacts, floods, earthquakes, extreme weather and other emergencies. International developments, including rising energy and food costs and instability in Afghanistan, are likely to have knock-on effects, exacerbating the impacts of emergencies on the most vulnerable.

For this reason, and in line with Grand Bargain commitments, UNICEF advocates for flexible and multi-year funding, which will be crucial to meeting protracted and complex humanitarian needs using a resilience-focused and systems-building approach.

In 2023 UNICEF will continue responding to the flood response and the pandemic while mitigating its impacts. Community engagement and communication will remain critical, and UNICEF will efficiently coordinate, generate evidence and provide timely, accurate, gender-sensitive information to promote positive behaviours, reduce risk and limit transmission.

UNICEF targets for 2023 are:

Health:

- 736,000 children vaccinated against measles
- 2,543,121 children vaccinated against polio
- 3,200,000 children and women accessing primary healthcare in UNICEF-supported facilities

Nutrition:

- 345,318 Children aged 6 to 59 months with severe acute malnutrition admitted for treatment
- 777,559 Primary caregivers of children aged 0 to 23 months receiving infant and young child feeding counselling
- 379,424 Children aged 6 to 59 months receiving multiple micronutrient powders.

WASH:

- 870,000 People accessing a sufficient quantity of safe water for drinking, cooking and personal hygiene
- 126,000 People accessing appropriately designed and managed latrines
- 1,200,000 People reached with messages on safe and hygienic practices
- 960,000 people reached with critical WASH Supplies (including hygiene items and MHH)
- 306 schools and learning centres provided WASH facilities.
- 60 health care centres provided with WASH facilities.
- Refugee Response Plan
 - 366,000 people accessing a sufficient quantity of safe water for drinking and domestic needs
 - 305,000 people use safe and appropriate sanitation facilities
 - 1,117,000 people reached with critical WASH messages

Education:

- 12,168 children (3-16+ years, 60% girls/ 40% boys) benefitting from prefabricated structures in locations with fully damaged schools.
- 354,000 children (3-16 + years, girls/boys) benefitting from schools dewatered, cleaned and disinfected.
- 365,000 children (3-16 + years, girls/boys) receiving school supplies –children (60% girls).
- 316,000 children (3-16 +years, girls/boys) benefitting from TLCs and alternate learning modalities.
- 225,000 children (3-16 + years, girls/boys) benefitting from schools rehabilitated.
- 162,500 children (3-16 + years, girls/boys) benefitting from schools.
- 12,400 teachers and education personnel trained (female/male) on PSS, multi-grade teaching and teaching in emergencies.
- 24,000 SMC members (female/male) trained on PSS and safe reopening and functioning of schools.
- 365,000 children (3-16 + years, girls/boys) enrolled in school following the results of the Back-to-School Campaigns (BTC).
- 700 TLC established.

Child protection:

- 300,914 children and parents/caregivers accessing mental health and psychosocial support.
- 3,106,817 boys, girls, women, men reached through awareness activities and UNICEF-supported community mobilization interventions on key child protection risks and available services.
- 3,143 girls and boys receiving individual case management and specialized services,
- 617,500 women, girls, and boys accessing GBV risk mitigation, prevention, or response interventions.

Donor Feedback Form

UNICEF is working to improve the quality of our reports and would highly appreciate your feedback. Kindly follow the link below to provide feedback on the Pakistan Consolidated Emergency Report 2022. Thank you!

UNICEF donor feedback form